

# Interlaboratory Study on Bone Extraction for Mitochondrial DNA Analysis

Scientific Working Group on DNA Analysis Methods Mitochondrial DNA Subcommittee

Contact Name \_\_\_\_\_

Title \_\_\_\_\_

Laboratory \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail \_\_\_\_\_

Type of laboratory (circle all that apply)

Academic  
Commercial  
Forensic  
Government  
Non-forensic

Methods routinely performed

mtDNA

sequencing (include range of bases)  
mini-primers (include range of bases)  
SNPs (include sites)

Nuclear DNA:

autosomal STR  
Y STR  
Y SNPs

Other markers (specify)

Average number of mtDNA assays performed annually \_\_\_\_\_

Average number of bones / hairs processed annually \_\_\_\_\_

Number of laboratory analysts \_\_\_\_\_

Laboratory accreditation status \_\_\_\_\_

**This application form must be faxed to 703-632-7573 (Attention: Connie Fisher) by June 1, 2005, to be considered for participation in the study.**

**If selected to participate, a written protocol must be submitted prior to shipping the study bone sample. Typing results should be submitted within three months of receipt of the bone sample.**